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12/18/2008 EEKUBAY2 00	000015 132755 10	564311	.\$ <sup>2</sup> /	John Davaid Re	il)v		(Depositor's name)	
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A DOMESTA TROOP AND	SH INC DATE		CIRCT MANES DIMENTOS	December 10,	2008	V POOVET NO I		
10/564,311	APPLICATION NO. FILING DATE 10/564.311 01/11/2006		FIRST NAMED INVENTOR Hidehito Kotani	<u>/ ·                                     </u>		BY0027P	CONFIRMATION NO.	
TITLE OF INVENTION:		ATING COMPOUND E		ING OBESITY		<i>510027.</i>	7112	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0		\$1810	02/13/2009	
EXAMIN	VER	ART UNIT	CLASS-SUBCLASS					
ZARA, JA	ANE J	1635	424-009100	•				
I. Change of corresponden CFR 1.363).  Change of correspon Address form PTO/SB/  "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required.	ndence address (or Char 122) attached. ation (or "Fee Address"	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	e names of up to 3 registered patent attorneys   John David Reilly					
recordation as set forth	ss an assignee is identi in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	· · · · ·	atent. If an assign assignment.			cument has been filed for	
Please check the appropriat	te assignee category or	categories (will not be pr	inted on the patent):	Individual 🛛 Co	orporation	or other private grou	p entity Government	
4a. The following fee(s) are  Leave Fee  Publication Fee (No Advance Order - # o	small entity discount p	ermitted)	o. Payment of Fee(s): (Plead A check is enclosed.  Dayment by credit care The Director is hereby overpayment, to Depo	d. Form PTO-2038	is attach	ned.	,	
5. Change in Entity Statu	SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMAI	LL ENTI	ΓY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the rec	cords of the United Sta	es Patent and Trademark	office.	ne applicant; a regi	stered att	orney or agent; or the	assignee or other party in	
Authorized Signature	x Jr	1	<del>-</del>	Date <u>Dec</u>	ember 1	16, 2008		
Typed or printed name	//	• / /		Registration N				
This collection of informat an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313	ion is required by 37 C ulity is governed by 35 application form to the ss for reducing this bur ginia 22313-1450. DO 3-1450.	FR 1.3 1. The information U.S.C. 422 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (	on is required to obtain or r 1.14. This collection is est depending upon the indive c Chief Information Office COMPLETED FORMS TO	etain a benefit by t imated to take 12 i idual case. Any co r, U.S. Patent and ) THIS ADDRESS	he public minutes to mments Tradema 5. SEND	which is to file (and o complete, including on the amount of tim rk Office, U.S. Departo: Commissioner for the com	by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450.	

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				John Davaid Re	eil)v		(Depositor's name)		
			TABLE IN X	( )	<del>16</del> .	9-	(Signature)		
				December 16	2008		(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		АТТО	RNEY DOCKET NO.	CONFIRMATION NO.		
10/564,311	01/11/2006		Hidehito Kotani	,		BY0027P	7112		
TITLE OF INVENTION	I: METHOD OF EVALU	JATING COMPOUND E	FFICACIOUS IN TREAT	NG OBESITY					
	<b>.</b>								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0		\$1810	02/13/2009		
EXAM	EXAMINER		CLASS-SUBCLASS						
ZARA,	JANE J	1635	424-009100						
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Change of corresp	ondence address (or Cha	nge of Correspondence	(1) the names of up to or agents OR, alternative	ely,	it attorn	· j 3 —————			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
PTO/SB/47; Rev 03-0 Number is required.	)2 or more recent) attach	ed. Use of a Customer	2 registered patent attor listed, no name will be	nevs or agents. If	no name	e is 3			
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PLEASE NOTE: Uni	less an assignee is identi	fied below, no assignee	data will appear on the pa T a substitute for filing an a	tent. If an assign	ee is ide	entified below, the do	ocument has been filed for		
(A) NAME OF ASSIG		-	(B) RESIDENCE: (CITY	-	COUNTI	RY)			
Banyu Pharmaceutical Co., Ltd. Japan						ŕ			
,	,		_						
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Co	orporatio	on or other private gro	up entity Government		
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	s SMALL ENTITY statu		☐ b. Applicant is no long			•	R 1.27(e)(2).		
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Typed or printed name	John David Rei	Lly	2	Registration N	o. <u>43,</u>	039			
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